## PART B - FEE(S) TRANSMITTAL

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23599	7590 12/01	/2006			· ·	mission
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ARLINGTON,	VA 22201	FEB 2 3 2007	(19)			(Depositor's name)
		A	<i>!</i> /			(Signature)
		TETRADENS			-	(Date)
APPLICATION NO.	FILING DATE	<del></del>	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/777,224	02/13/2004		Harald Hirschmann		MERCK-2839	2499
TITLE OF INVENTION	I: LIQUID-CRYSTALLI	NE MEDIUM			·	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	03/01/2007
EXAM	INER	ART UNIT	CLASS-SUBCLASS			
WU, SHE	AN CHIU	1756	428-001100			
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is of up to 1 general patent attorneys or agents, If no name is of up to 2 registered patent attorneys or agents. If no name is of up to 1 general patent attorneys or agents. If no name is of up to 1 general patent attorneys or agents. If no name is of up to 1 general patent attorneys or agents. If no name is of up to 1 general patent attorneys or agents. If no name is of up to 1 general patent attorneys or agents of up to 1 general patent attorneys or agent att			
PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSI	less an assignee is identi th in 37 CFR 3.11. Comp	fied below, no assignee pletion of this form is NO	THE PATENT (print or typ data will appear on the pa T a substitute for filing an a (B) RESIDENCE: (CITY Darmstadt,	itent. If an assigne assignment. and STATE OR CO	594 e is identified below, the d	309.00 OP ocument has been filed for
Please check the appropr	iate assignee category or	categories (will not be pr	inted on the patent):	Individual X Cor	poration or other private gro	oup entity Government
4a. The following fee(s)  Issue Fee  Publication Fee (N Advance Order	No small entity discount p		<ul> <li>D. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>✓ A check is enclosed.</li> <li>✓ Payment by credit card. Form PTO-2038 is attached.</li> <li>✓ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-3402 (enclose an extra copy of this form).</li> </ul>			
a. Applicant claim	tus (from status indicated as SMALL ENTITY statu	s. See 37 CFR 1.27.		_	L ENTITY status. See 37 CI	
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Authorized Signature				Date Fe	bruary 23, 2007	
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